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	Att mey D cket Num	ber OP 03/108	
DECLARATION FOR UTILITY OR DESIGN	First Named Invent r	Tyan	
PATENT APPLICATION	COMPLE	TE IF KNOWN	
(37 CFR 1.63)	Application Number		
Declaration Declaration	Filing Date		_
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit		
Filing (37 CFR 1.16 (e)) required)	Examiner Name		

•	9	required)		Examiner Name				
	As the below named inventor, I her	eby declare t	hat:					
	My residence, mailing address, and c	itizenship are	as stated below	next to my name.				
	I believe I am the original and first inve	entor of the su	bject matter wh	ich is claimed and for	which a patent	is sought on th	e invention o	entitled:
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	BI-DIRECTIONAL PLC	IRANSCI	IVER DE	VICE				
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			(Title of the Inv	vention)				
	the specification of which		(1120 01 010 1114	diladily				
	is attached hereto							
	OR r							
	was filed on (MM/DD/YYYY)			as United State	es Application N	lumber or PCT	Internationa	al
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	Application Number	an	d was amended	on (MM/DD/YYYY)			(if applicab	10).
	I hereby state that I have reviewed an	d understand	the contents of	the above identified s	pecification, inc	luding the clair	ns, as amen	ided by
	any amendment specifically referred to	o above.			,	J		·
١,	I acknowledge the duty to disclose infi applications, material information whic international filing date of the continua	h became ava	ilable between					n-in-part
-	hereby claim foreign priority benefits	under 35 U.S	C. 119(a)-(d) o	or (f), or 365(b) of any	foreign applica	tion(s) for pate	nt, inventor	s or plant
	breeder's rights certificate(s), or 365( States of America, listed below and h breeder's rights certificate(s), or any	lave also iden	tified below, by	checking the box, ar	ny foreign applic	cation for pate	nt, inventor:	s or plant
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	Prior Foreign Application Number(s)	Cou	ntry	Foreign Filing Dat (MM/DD/YYYY)	e Priori Not Clai		ied Copy A YES	ttached? NO
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	Additional foreign application ou	mhere are list	ad on a sunnien	nental priority data she	et PTO/SR/02	A attached her	eto:	

[Page 1 of 2]

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# **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: Customer Numb or Bar Code Lab			OR V Con	respondence address below	
Robert Nick					
PO Box 3156			<del></del>		
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- <u>-</u> '	(949) 709-0277			(949) 709-0277 Fax	
Country Te	lephone			[ F8X	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :	A petition h	as bee	en filed for this unsign	ned inventor	
Given Name Renchung Rongchung			Y Name Tyan		
(first and middle [if any])		or Sur	name		
Inventor's Signature				Date 7/29/2003	
Irvine	CA		USA	USA	
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0442 Naabe Olidie Na.					
Mailing Address					
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City	State		ZIP	Country	
NAME OF SECOND INVENTOR:	A petition na	s been	filed for this unsigne	a inventor	
Given Name Hee Choon			Kang		
(first and middle [if any])		Family	Name		
Inventor's Kanyheichov	~	or Sun	iame	Date 7/29/2003	
T //	CA		USA	Popublic of Koron	
Torrance (/	ł		1	Republic of Korea	
Residence: City	State		Country	Citizenship	
23939 Ocean Ave. #207 Mailing Address					
			00505		
Torrance	CA		90505	USA	
City	State		ZIP	Country	
Additional inventors are being named on the 1 s	upplemental Additio	nal Inve	entor(s) sheet(s) PTO/SB/	02A attached hereto.	

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#### **DECLARATION**

## **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if an	ıy:		A petition has been filed	for th	is unsigned inventor		
Edgar A. Given Name	Mendoza Family Name or Surname						
Inventor's Signature	75				Date 7/29/03		
Redondo Beach Residence: City	CA State	1	USA Country		JSA Citizenship		
2803 Faber St. Mailing Address							
Mailing Address							
<sub>City</sub> Redondo Beach	CA State	9		SA ountr	у		
Name of Additional Joint Inventor, if any:   A petition has been filed for this unsigned inventor							
Lothar U.  Given Family Name  Name  Family Name  Family Name							
Inventor's Signature Date 7/29/03							
Redondo Beach Residence: City	CA State		SA Country		Netherlands Citizenship		
224 1/2 North Juanita Avenue Malling Address							
Mailing Address							
Redondo Beach	CA State			SA	v		
Name of Additional Joint Inventor, if an	ıy:		A petition has been filed fo				
Given Family Name Name or Surname							
Inventor's Signature					Date		
Residence: City	State		Country		Citizenship		
Mailing Address							
Mailing Address							
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### **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Tyan
Title	Bi-Directional PLC Transceiver Device
Group Art Unit	
Examiner Name	
Attorney Docket Number	OP 03/108

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I am the:				
X Applicant/In	ventor.			
Assignee of	record of the entire interest. See 37 inder 37 CFR 3.73(b) is enclosed. (F	CFR 3.71.		
Statement u				
	SIGNATURE of Applicant or		TO	
Name	Lothar U. K	Kempen		
Signature	( O76)/ C	7		
Date	7/23/03			المناسبة المسالم
NOTE: Signatures of all the	inventors or assignees of record of the entire ature is required, see below*.	interest or their repre	sentative(s) are require	u. Supmii muiupie
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Application Number	
Filing Date	
First Named Inventor	Tyan
Title	Bi-Directional PLC Transceiver Device
Group Art Unit	
Examiner Name	
Attorney Docket Number	OP 03/108

I hereby appoint:  Practitioners at Customer Number OR  Practitioner(s) named below:  Name Registration Number Robert Nick S1,202  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  I he above-mentioned Customer Number. OR Practitioners at Customer Number OR Firm or Individual Name Robert Nick Address PO Box 3156 Address City Laguna Hills State CA Zip 92664
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I am the:
X Applicant/Inventor.
Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record
Name Kongchung Tonchung Tyan
Signature \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
Date . 7/29/2003
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multi-
forms if more than one signature is required, see below.   Total of 4 forms are submitted.

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Filing Date	
First Named Inventor	Tyan
Tide	Bi-Directional PLC Transceiver Device
Group Art Unit	
Examiner Name	
Attorney Docket Number	OP 03/108

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		Name		Registration	Number
		Robert Nick		51,202	
		agent(s) to prosecute the application States Patent and Trademark Office of			to transact all
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Address		PO Box 3156			
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Telephone		(949) 709-0277	Fax	(9-	49) 709-0277
	e of reco	ord of the entire interest. See 37 CFR		2,00	
Stateme	nt unde	37 CFR 3.73(b) is enclosed. (Form			
		SIGNATURE of Applicant or Assi		Record	
Name		Edgar A. Mend	oza		
Signature		12 m/7 ()	<u> </u>	_	
Date	,			29/03	
NOTE: Signatures of all forms if more than one :		tors or assignees of record of the entire inter is required, see below.	est or the	ir representative(s)	are required. Submit multiple
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Filing Date					
First Named Inventor	Tyan				
Title	Bi-Directional PLC Transceiver Device				
Group Art Unit					
Examiner Name					
Attorney Docket Number	OP 03/108				

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Practition OR	ners at (	Customer Number		]-	Nur	ce Custo nber Ba el here			
	Name			Registration Number					
	Robert Nick			51,202					
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Telephone		(949) 709-0277	F	ax (949) 709-0277					
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
		SIGNATURE of Applicant or As	ssignee	of	Record				
Name	Hee Choon Kang								
Signature	Kangheichow								
Date									
		ntors or assignees of record of the entire in is required, see helow.	terest or	their	r representative(s) ar	re require	ed. Submit multiple		
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